MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/589932 **FILING DATE**

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1				51							
2		1		1			52							
3		2		1			53							
4		2		1			54							
5				1			55							
6				1			56							
7		1		1			57							
8				1			58							
9				1			59							
10				1			60							
11				1			61							
12				1			62							
13				1			63							
14				1			64							
15	1		1				65							
16	1			1			66							
17				1			67							
18				1			68							
19				1			69							
20				1			70							
21				1			71							
22	1		1				72							
23	1		1				73							
24		1		1			74							
25		2		1			75							
26				1			76							
27				1			77							
28				1			78							
29	1		1				79							
30		1		1			80							
31				1			81							
32				1			82							
33				1			83							
34				1			84							
35				1			85							
36				1			86							
37				1			87							
38				1			88							
39				1			89							
40				1			90							
41							91							
42							92							
43							93							
44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
TOTAL IND.	↓		5	↓		↓	TOTAL IND.		↓			↓		↓
TOTAL DEP.		←	35	←		←	TOTAL DEP.			←			←		←
TOTAL CLAIMS			40				TOTAL CLAIMS							

PTO - 1360 (REV. 11/04)